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ABSTRACT

A profile of Turkey is sketched in this paper. Emphasis is placed on the nature, scope, and accomplishments of population activities in the country. Topics and sub-topics include: location and description of the country; population (size, growth patterns, age structure, urban/rural distribution, ethnic and religious composition, migration, literacy, economic status, future trends); population growth and socio-economic development (relationships to national income, size of the labor force, agriculture, social welfare expenditures; history of population concerns); population policies; population programs (objectives, organization, operations, research and evaluation); private efforts in family planning; educational and scientific efforts in population; and foreign assistance for family planning activities. (RH)

Country Profiles

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TURKEY

THIS profile was prepared by Lewis S. Anderson, M.D., the Population Council's Resident Medical Consultant in Turkey. He expresses his appreciation to the Population Planning Directorate General of the Ministry of Health and Social Assistance for generous help in its preparation.

Location and Description

Turkey is a rectangular-shaped country, stretching 1,000 miles from east to west and 450 miles from north to south. The great bulk of land lies on the Asian side of the Bosphorus and the Dardanelles, though a small but agriculturally important section lies on the European or western side of these two bodies of water. The land on the European side is low, rolling, and fertile; on the Asian side a fertile strip borders the coast of the Black Sea, the Sea of Marmara, the Aegean, and the Mediterranean, ranging from 5 to 25 miles in width, except on the Aegean side where the fertile section reaches inland for about 150 miles.

From the shores of the Aegean Sea eastwards, the land rises gently for several hundred miles and then more sharply up onto the Anatolian plateau, which stretches to the Iranian and Russian borders at an altitude of from 800 to about 1,750 meters. The remaining 400 miles to the eastern border lie at an altitude of around 1,600 meters. The Anatolian plateau is guarded on the north and south by two high mountain ranges, which make access to the sea from the central Anatolian plateau difficult, especially in winter. The border with Russia is mountainous and largely inaccessible; along the Iranian and Iraqi borders the land is rolling and was formerly more fertile than it is now. Many large areas, especially in eastern Turkey, are rugged and mountainous, and the whole country is crossed obliquely from southwest to northeast by the Taurus Mountains, which form an effective barrier to roads and railways.

Wheat is the main source of food in Turkey. The total annual production doubled to 14 million metric tons between 1946 and 1951 and has remained steady since. There is some indication that Mexican hybrid wheat, which can be grown on the frost-free areas of Turkey (about 12 per cent of the wheatland), may cause another increase in production in the next few years; but this depends on an increase in the use of fertilizer, which has not yet taken place. Although Turkey was formerly a wheat-exporting country, it has had to import wheat for the last six years to feed a rapidly growing population.

The climate is varied. On the Aegean and Mediterranean coasts it is mild all the year a low rainfall, in March and April, makes it ideal agricultural country. Along the Black Sea coast the winter is cold and the summer season short and hot. The eastern end of the coast has a heavy rainfall. The fertile soil here yields good tobacco crops at sea level; tea is grown on the high mountain slopes. The entire Anatolian plateau has a fairly light rainfall, averaging 20 to 30 inches per year, with a cold winter and a hot dry summer.

Population

Size

Turkey's population is doubling itself about every 28 years and will reach 35 million by 1970. In 1965 there were roughly 20 million people living in the western half of Turkey (west of a vertical line from Samsun to Adana) and roughly 10 million people living in the eastern half, but about 45 per cent of the babies born for that year were born on the eastern side. There has thus been a heavy population growth in the least hospitable area of Turkey, the east, which is also, because of soil fertility and climate, the area least able to expand its resources. In the western half lie the richest agricultural country and practically all the industry of Turkey; in the eastern half, very little industry and only a subsistence level agriculture (with the exception of some wheat-growing areas).

Number of households and household size. Household size varies considerably from the east to west. Extrapolation from the 1965 census at the appropriate population growth rate indicates that by 1970 in western Turkey 23 million people will be living in 4.9 million households, an average household size of 4.7 persons. The 12 million in eastern Turkey will live in 1.4 million households, averaging 8.5 persons per household. The total population of 35 million will live in 6.3 million households.

Total number of married women of reproductive age. One estimate for 1968 suggests 5.2 million married women of reproductive age (15–44 years), which is about 16 per cent of the population.

Median age at first marriage. The median age at marriage, reported to be fairly constant throughout Anatolia, is about 18.3 years for women; it is younger, as one might expect, in the rural areas of eastern Anatolia

where it is 17.9 years for women. The proportion of women over 45 who have never married (single) varies from 1.6 per cent in rural to 3.4 per cent in urban Turkey, the national figure being 2.4 per cent. The average age at marriage for men is about four years higher.

Growth Patterns

The population growth rate in rural areas is 2.7 per cent and in urban areas 2.0 per cent. The highest growth rates are in the rural sections of eastern and central Anatolia, the eastern growth rate being approximately 3.5 per cent. The population growth rate is likely to rise in the next few years as the progressive improvement of public health services reduces mortality.

For Turkey as a whole the expectation of life at birth in 1966, as calculated by Fisek and Shorter, was 54 years, an increase of 4 years over the 1960 level.

Rural/Urban Distribution

Between 1950 and 1965 the population growth of Ankara indicated a doubling time of 9 years; of Istanbul, 18 years; and of Izmir, 18 years. When compared with the national doubling time of 28 years, these figures indicate a strong migration to the cities. Among the factors influencing people to move to the cities are: mechanization of agriculture, larger numbers of surviving children in each family, a reduction in soil fertility, and the relatively greater availability of education in the cities. Although completed family size tends to be smaller in the cities, this occurs only after families have lived the urban life for about half a generation; the new migrants, mainly displaced agricultural workers, bring their rural ideas of family size with them.

In eastern Turkey mechanization of agriculture and completed family size larger than in the west (due mainly to falling death rates in the infant years) are producing a steadily growing east-to-west drift of population. Concurrently there is a movement from villages to towns, mostly of uneducated people who are seeking monetary employment.

Religious Composition

The bulk of the population, 99.3 per cent, is Muslim, although there are some minorities, 206,000 Christians and 38,000 Jews, almost all of whom live in Istanbul.

Literacy

In 1965 70 per cent of primary school age children were enrolled in school; 15 per cent of middle school age children were enrolled; and 5 per cent of high school age youth. Of the males aged 15 and over, 64.7 per cent were classed as literate; for the females aged 15 and over, the corresponding rate was 27.6 per cent.

The fact that the percentage figure of literate males is more than twice that of females probably reflects the impact of two cultural processes. First, two years of army service are compulsory for all males; 58 per cent of the new recruits are illiterate, and most of these receive some literacy training in the army. They are then classed as "literate." (However, when a soldier returns to his village after his military service, unless he is unusually keen or gifted, he is likely to lose the art of reading.) Second, and much more important, there is strong competition for places in the elementary schools and thus a tendency for the boys to get the places rather than the girls. This is reflected in the fact that by the age of 19, just before a boy would be starting his military service, 42 per cent of males are literate but only 26 per cent of females.

Economic Status

The average per capita GNP (gross national product divided by population) in 1968 was US$301 per year. According to the 1965 Census 58 per cent of the male active population was in the agricultural sector, including forestry, hunting, and fishing; 10 per cent of the male active population was in manufacturing; and the balance was in the remaining industrial and service sectors.

Future Trends

In 1965 20.6 million of Turkey's 31.4 million inhabitants lived in rural areas. In the next 10 to 15 years this number is expected to be reduced substantially because of the mechanization of agriculture. Thus the population in urban areas will be growing much more rapidly than that of the country as a whole. If the population of Turkey were to continue to double approximately every 28 years (as at present) for the next 50 years, it would total 140 million by the year 2019. According to the estimate of the State Planning Office, only about 10 or 15 million of these 140 million would still be living close to the soil.

If the population growth rate can be lowered to 1.5 per cent in the next 10 years, after 1980 the doubling of the population would take place only every 46 years. There would then be 55 million people in the cities of Turkey by the year 2015 instead of by the year 1995.

Population Growth and Socio-Economic Development

Relationship to National Income

The gross national product (GNP) of Turkey rose an average of 6.5 per cent per year at fixed market prices (1965) between 1962 and 1966; the per capita gross national product rose an average of only 3.7 per cent per annum. The per capita GNP in 1967 was $289 ($301 in 1968) at 1965 prices and at the official exchange rate of $1=9TL. At a 2.6 per cent population growth rate it is expected to be $1,145 by the year 2000, assuming that the 7 per cent growth rate of the Turkish economy is maintained. If, however, the population growth rate can be reduced to 2 per cent by 1975, the per capita share of the gross national product would be about $1400 in the year 2000.

Relationship to Size of Non-Agricultural Labor Force

In the last few years about 600,000 people have been entering the non-agricultural sector of the labor market every year. By 1970 this figure will increase to 735,000 per year. The State Planning Office predicts that, if the present economic plans mature, new jobs will become available over the next 15 years for 7,500,000 people in the non-agricultural sector. This figure, which averages 500,000 jobs per year, is 100,000 per year less than the cohort entering the labor market now and does not account for the 1,300,000 unemployed and underemployed already existing in the non-agricultural sector. So far this year, 775,000 people, most of them unskilled, have applied to work abroad; it is planned to send 60,000.

TABLE 1. *School Enrollment and Costs, 1967 and 2000, for Specified Population Growth Rates*

Year	Primary School		Middle and High School		Total	
	Number of Students (thousands)	Cost* (TL million)	Number of Students (thousands)	Cost* (TL million)	Number of Students (thousands)	Cost* (TL million)
1967	4,693	1,369	935	981	5,628	2,350[a]
2000						
Projection based on 2.0 per cent population growth rate	9,053	6,998	5,228	17,008	14,281	24,006[b]
Projection based on 2.6 per cent population growth rate	10,547	8,153	6,038	19,664	16,585	27,817[c]

Source: Tuncer, B. *The Impact of Population Growth on the Turkish Economy*. Hacettepe Institute of Population Studies, 1968.
TL 1 = US$.11. a US$261 million. b US$2667 million. c US$3090 million.
* Calculations assume an annual increase in per student expenditures of 3 per cent for primary school and 4 per cent for secondary school.

If the population growth rate is reduced to 1.5 per cent by 1980, increasing the doubling time to 46 years, there would be a reduction in the labor force entering the market which should begin to make itself felt by about 1995 and be really significant around the turn of the century—that is, when the reduced cohorts are reaching the age of 15 or 20.

Relationship to Agriculture

The main feature of Turkish agriculture is rapid mechanization. The State Planning Office estimates tractor production as follows: 1967, 12,000; 1968, 16,000; and 1969, 19,000. The numbers licensed for 1966 (65,000) and 1967 (75,000) indicate a total tractor force of about 110,000 in 1969 (though the State Planning Office, on the basis of its 1968 survey, estimates that this last figure should be nearer 120,000).

It has been estimated that each additional tractor displaces eight families (about 70 people), and the total displacement from the land at present is approximately one million people per year. This number is only slightly less than the present annual growth of Turkey's population.

Except for the years 1966 and 1967, cereal production has been insufficient to feed the population since 1958. In 1968, 400,000 tons of wheat had to be imported (annual production about 13 million tons); 850,000 tons are being imported this year, 1969, despite the planting of hybrid strains. There is a limit to the increase in arable land; increased production in the future will depend entirely on increased yields. Efforts at increasing yields are being made in southern Turkey, especially with the use of irrigation.

Relationship to Social Welfare Expenditures

Public education. About 5.6 million students were enrolled in primary, middle, and high schools in 1967, at a cost of $261 million. If Turkey's population grows at 2.6 per cent, the cost in the year 2000 is projected to be $3,090 million. If the population growth rate can be reduced to 2 per cent by 1975 the cost in the year 2000 would be about $2,667 million, a saving of $423 million a year. The relationship between educational costs and varying growth rates is shown in Table 1.

Public health. Expenditure on public health has increased during the late 1960's at an average annual rate of about 10 per cent. At Turkey's present 2.6 per cent population growth rate the health services wil absorb $4,318 million in the year 2000; if the population growth rate can be reduced to 2 per cent by 1975 the services would cost $3,517 million, representing a saving of $801 million per annum.

History of Population Concerns

Growth Trends

Population growth in Turkey has been increasing rapidly since 1924. The national policy became strongly pro natalist following the decimation of men in the preceding 12 years of war. During World War II population growth slowed; this was due less to a decline in fertility than to a high rate of mortality caused by worsening health conditions.

A sharp rise in the population growth rate at the end of the War appears to have been due, in the context of already high fertility, to improved health and medical services, which caused a steady fall in mortality rates at all ages.

Over the past 25 years the death rate has fallen steadily from 25–30 per thousand to the present level of about 15 per thousand; the birth rate has fallen from the high forties to about 40 per thousand. The age distribution is such that one would expect a rise in the birth rate because the large numbers of young women born after World War II, when the death rate fell sharply, are now starting their families. This expectation, however, does not seem to be fulfilled: the latest results from the Turkish Demographic Survey show an encouraging fall in the birth rate throughout the country, even in the eastern region.

Prevalence of Abortion

An estimate of 200,000 abortions a year has been made by extrapolation from a number of small surveys and observations conducted over the last ten years. It is evident from the emergency wards of maternity and

other hospitals that a sizeable number of deaths every year result from self-induced abortion.

Informed gynecological opinion estimates that, prior to the newly liberalized abortion regulations, 20 to 25 per cent of all abortions were performed for medical reasons, usually by gynecologists, at the standard fee of TL 300 ($33.33); and that since the new regulations this figure has risen to more than 50 per cent, with a consequent increase in maternal safety.

Population Policies

Under the April 1965 law it became government policy that (a) every couple in Turkey should have the right to have as many or as few children as they wished; (b) that the Ministry of Health be charged with the responsibility of bringing family planning services to every couple; and (c) that a Family Planning Division be set up within the Ministry of Health.

Support and Opposition

The government supports the 1965 law. Opposition to the family planning program comes mainly from certain elements and supporters of the military who believe that Turkey needs a very large army; from some commercial people, mostly in Istanbul, who believe that a larger population will mean a larger market; and from some medical men who are making a sizeable income by performing abortions and are therefore reluctant to advocate contraceptive methods.

Basis for Adoption

After the revolution of May 1960 planning in all areas was instituted. The new military government drafted a constitution which stressed planning and set up the State Planning Organization as a wing of the Prime Minister's Office. Population planning became a serious objective. The Under-Secretary of State for Health at that time spearheaded the efforts to draft and pass the 1965 Family Planning Law.

A key factor in this process was the invitation from the government of Turkey in 1963 to the Population Council to send a mission to Turkey to examine demographic factors and to make recommendations for the operation of a national family planning program. The Council also supported a KAP survey, the results of which showed that over two-thirds of the population wanted a family planning program and three-fourths of these wanted it to be conducted by the government.

Relevant Laws

Article 1 of the Family Planning Law, No. 557, passed 10 April 1965, states: "individuals may have as many children as they wish whenever they wish. This can be ensured through preventive measures taken against pregnancy, but neither castration, sterilization nor the termination of pregnancy may be performed unless medically necessary." Under Article 2 the Ministry of Health was authorized to take the necessary measures.

New, liberalized abortion regulations, entitled "Regulations for the Termination of Pregnancies when Medically Necessary," were passed by the Council of Ministers 3 July 1967, decision Number 6/8305. These regulations take the form of a long list of medical causes that justify therapeutic abortion (one of which is pregnancy with a foreign body in the uterus). It is now likely that most women desiring an abortion will be able to obtain one under medical care.

Population Programs

Objectives

The target of the family planning program is to bring services to 5 per cent of all women of childbearing age each year. By the cumulative effect of this it is hoped that the health of all mothers and children in Turkey will be greatly improved.

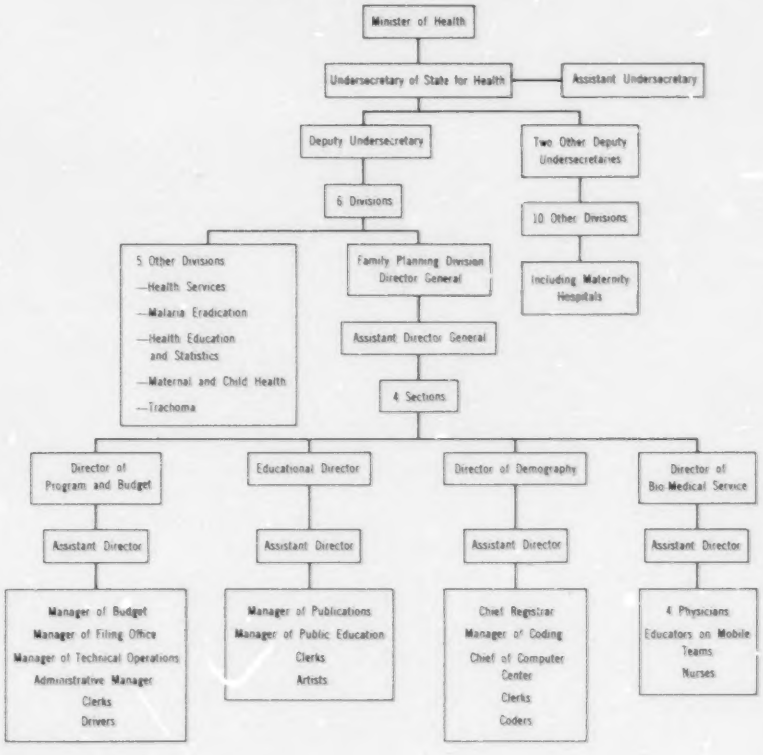
Type

The program is based almost entirely on family planning education and services. There is currently little effort made to raise the average age of first marriage and little progress in instituting universal education for girls in order to promote the employment of young women.

Organization

The program operates from a division within the Ministry of Health under a Director-General (Figure 1). The

FIGURE 1. *Organization Chart*



division has four sections: administration, education, demography, and bio-medicine. In each province a family planning director is nominated who may be either a gynecologist or the health director of the province. The 67 provinces of Turkey are grouped into 16 regions. It is planned to appoint a director for each region; five have already been appointed. Amalgamation of the Family Planning and the Maternal and Child Health Divisions of the Ministry of Health is being planned.

Family planning clinics are being established in every province; 491 have already been opened. It is hoped that sufficient transport will become available to enable the provincial staff to bring services even to the more remote of Turkey's 35,000 villages. Family planning clinics are located in health centers (eastern Turkey), maternal and child health centers (western Turkey), maternity hospitals, and maternity wings of general hospitals.

Operations

Mobile teams. Because of the large size of the country it is impossible to establish permanent family planning clinics within easy access of every woman (about seven miles). With assistance from the Population Council, the Ministry has experimented with mobile teams, each of which consists of two vehicles. In the first are one male and one female educator, who conduct meetings in villages on a planned circuit; in the second, which typically follows one day after the first, are a doctor and a midwife who provide family planning services. In general, these mobile teams have been successful. A shortage of vehicles has made it impossible to organize mobile teams in every province, but some provinces with their own vehicles and an interest in family planning have organized their own mobile teams. On the basis of a loan agreement between the Turkish Government and US/AID, signed in 1965, a number of vehicles for health and family planning are expected in 1970.

Postpartum program. The Ankara Maternity Hospital, which delivers about 12,000 babies a year, is part of the international postpartum program organized by the Population Council with the aim of integrating family planning into the prenatal, delivery and postpartum services of a maternity hospital. It has not yet been possible to extend this program to six other maternity hospitals, though the Ministry has agreed in principle to do so. One of the main obstacles is lack of staff in the provincial hospitals.

Family planning committee. In 1967 the Under-Secretaries of State for Education, Agriculture, Labour, Village Affairs, Defense, and Industry formed an intergovernmental committee on family planning. The committee met two or three times during 1967 and 1968 to review Turkey's population problems and to overcome any barriers there might be to interministerial cooperation at the middle levels.

Military service. The two-year compulsory military service could serve as a means to educate every Turkish male in family planning methods. Implementation of such family planning education in the armed services may take place soon.

Incentives. Since August 1967 incentives have been offered to doctors and helpers to insert IUDs; TL 10 (US$1.11) for the doctor and TL 5 (US$.55) for the helper. Although incentives have not proved very satisfactory, they have at times provided a much needed source of income. They apply only to IUDs and not to oral or conventional contraceptives.

Information and education. There is considerable informal education at Ankara Maternity Hospital; word is passed around that family education services are available at the outpatient clinic and that they are helpful. In rural areas the radio is the most effective means of communicating information. The Family Planning Division's monthly bulletin goes out to the headmen (muhtars) of about 12,000 villages where it is sometimes read aloud. Occasionally an expert from town visits the village to discuss family planning and to answer questions. The satisfied user is still the best overall promoter but apart from the mobile teams there are as yet few users in the remote villages.

Methods. The range of methods in Turkey is narrower than in some other developing countries. A widely used method is the IUD (Lippes loop); to date 190,000 Lippes loops have been inserted.

In one or two provinces the medical authorities have promoted the use of orals; these have been well received, at least in the towns. Apart from this the oral contraceptive is not much used in government clinics, perhaps because there is no incentive payment. Only about 10,000 cycles have been given out since the orals were introduced in November 1967. The private purchase of oral contraceptives, however, has been quite extensive; as of January 1969 about 100,000 cycles a month were being sold in drug stores at US$.83 per cycle. By law a woman can obtain oral contraceptives only on a prescription from her doctor (renewable every three months) but in practice it is hard to keep track of these three-month prescriptions and the orals are available almost anywhere on demand.

There are five varieties of orals licensed in Turkey, all made in Istanbul, using imported chemicals under franchise from foreign firms. Licensing of orals requires a six-month trial on 200 patients and evaluation of the results by the High Medical Council. IUDs are made in Istanbul from a mold and with pre-blended plastic, both supplied by the Population Council.

In western Turkey condoms are sold in all the drug stores. Other methods traditionally used include withdrawal and the use of sponges. Sale of foam tablets is reported to be small but the Turkish Development Foundation is considering expanding into this area. The purpose of this Foundation, which was established in late 1968 with funds contributed jointly by Adana businessmen and two U. S. Foundations, Merrill and Dianthe Dewey, is to explore and promote ways of increasing self-help in rural communities. Family planning is high on its list of priorities.

Personnel. Both professional and nonprofessional personnel are divided into two categories: those working full-time for the Family Planning Division in the Ministry of Health (Figure 1), and those working part-time.

Part-time personnel comprise all who are asked to carry out some part of the family planning program in addition to their ordinary work (often only if their ordinary work permits). These people are responsible to heads of other divisions in the Ministry; the

Director-General of Family Planning has no authority over them or any other family planning workers in the field, apart from the mobile teams directed from the Ministry itself in Ankara. At present the 841 part-time personnel consist of 427 gynecologists, 401 general practitioners, and 13 other medical specialists. All 841 doctors have certificates entitling them to employ modern methods of contraception, including the insertion of IUDs. However, in many areas of Turkey husbands will not allow their wives to see a male doctor for the insertion of a loop or for the discussion of other methods; in these areas women doctors are required. This does not apply to gynecologists who work in hospitals in small towns where many women see male gynecologists and do not object to discussing family planning with them. It is mainly in the health units and maternal and child health centers that women doctors are needed.

The Ankara Maternity Hospital recently trained 18 midwives in family planning techniques, including the Papanicolaou test and the insertion of loops. Over 5,500 other personnel (midwives, nurses, and sanitarians) have been given one week's training in the educational aspects of family planning to enable them to combine it with their other health work.

Budget. The total budget for family planning may be divided into three parts, on the basis of source.

(a) The Ministry of Health Family Planning Division's own annual budget, appropriated by Parliament, covering salaries, per diem, social security premiums, course and office expenses, communications, vehicle maintenance and operating expenses, rents, uniforms, and other expenses: TL 22,453,621 (US$2,526,032) for the year 1969 (Table 2).[1]

(b) A grant of Turkish lira from what are known as "counterpart funds," jointly agreed upon by the Ministry of Finance and the U. S. Agency for International Development, covering support of provincial family planning directors, field workers, travelling expenses, incentive payments, research reports, follow-up and program evaluation, publication of texts, training and information material: approximately T.L. 4,518,200 (US $502,022), over the years 1967, 1968, and part of 1969.

(c) Grants from foreign foundations. The Swedish International Development Authority contributed $100,000 in 1967 mainly for oral contraceptives, and a similar or larger sum is being offered in 1969. The Population Council has contributed $1,719,780 up to and including 1969, in consultants, vehicles, contraceptives, statistical machinery, educational materials, fellowships, salary supplements, etc. The Ford Foundation has contributed $375,000 for population studies.

Research and Evaluation

The material on which evaluation of the family planning program is based is contained in a return form, known as the Plan-Toto Form, one copy of which goes to the doctor's office, one to the provincial family planning office, and one to the Director-General's office in Ankara. The information is card-punched, analyzed, and sorted, at present, in the office of the Turkish Demographic Survey (TDS), an ongoing survey of population dynamics in Turkey associated with the Family Planning Division.

The Plan-Toto Form has two functions: it serves as a basis for payment to the physician and it provides the basic data for service statistics. The Demographic Section of the Family Planning Division in the Ministry of Health is responsible for the Plan-Toto return, for analysis of service statistics, and for special purpose surveys. It is developing a statistical arm, involving a computer center presently being established in the Ministry, using key punch, verifying, and sorting machinery obtained with a Population Council grant.

A large scale nationwide IUD follow-up study was mounted in the summer of 1969 by the Demographic Section of the Family Planning Directorate.

[1] Ten million of this 22.5 million is being held in reserve for the maintenance of AID vehicles.

TABLE 2. *Government Budget: Total and Relative Outlays for Ministry of Health and Family Planning*

Year	Total	Ministry of Health		Family Planning	
	TL million	TL million	As Per Cent of Total	TL million	As Per Cent of Ministry of Health
1963	12,102	511	4.2		
1964	13,484	551	4.1	3.8	0.7
1965	14,421	591	4.1	5.1	0.8
1966	16,775	662	3.9	6.7	1.1
1967	18,813	772	4.1	7.6	1.0
1968	21,612	856	3.9	17.5	1.9
1969	25,697	912	3.5	12.5	1.4

TL 1 = US$.11.

Private Efforts

The Turkish Family Planning Association, founded in 1963 and affiliated with the International Planned Parenthood Federation in 1964, has 15 active provincial branches and seven more in the process of formation.

Originally the Association operated a few clinics of its own, parallel with the government clinics; it still runs one in Istanbul. However, it is gradually assuming the valuable role of educator of the public, by conveying information and by encouraging women to attend the government clinics. The recent appointment of three extra staff members who will travel through Turkey, teaching and forming new branches, fills a long unmet need.

Funds for the Association have been forthcoming from IPPF, starting with an initial grant of TL 25,000 in 1964, as follows: 1966, TL 88,000; 1967, TL 250,000; 1968, TL 580,000; 1969, TL 215,000. The Prime Minister's Office of the government of Turkey supplied TL 90,000 in 1966, TL 90,000 in 1967, and TL 10,000 in 1968. The Family Planning Division

of the Ministry of Health made TL 100,000 available to the Association in 1969.

Another private association is the Family Planning Committee of the University Women's Association, a group of university women, based in Ankara, who hold meetings in villages, factories, and other industrial establishments such as oil refineries, and steel works. During 1968 the total overall attendance at these meetings was 8,759. The activities of this group are becoming more closely coordinated with those of the Turkish Family Planning Association.

Educational and Scientific Efforts

Hacettepe University. Hacettepe, one of three universities in Ankara, established an Institute of Population Studies (HIPS) in August 1966, aided by a grant of $375,000 from the Ford Foundation. Training of the first group of students, for a two-year Master of Arts degree in population dynamics, began in the fall of 1967. The Institute is making detailed measurements of population and family dynamics in the University Medical School's training area, Etimesgut (population 55,000), where medical and nursing students are assigned a group of families to study. HIPS publishes a quarterly bulletin describing family planning efforts and Turkey's population problems. In 1968 it conducted a national family study using questions comparable to some KAP questions which had been used in a previous national study in 1963.

Ataturk University. The Medical School at this University in eastern Turkey has a Department of Community Medicine which arranges for medical students to live in villages in Erzurum province for several weeks in every semester. Although their primary concern is with the general health of the families in the villages in which they live, the students are also probing different methods of communicating family planning information to women and their husbands. One of the most important results of this system should be that the coming generation of medical graduates will be fully aware of population pressures and family planning problems in the villages.

Turkish Demographic Survey. The Turkish Demographic Survey, mentioned earlier in connection with the processing of the Plan-Toto forms, provides basic demographic estimates on a current basis. For the purposes of the Turkish Demographic Survey the entire country has been divided into five main areas. Houses in the sample selected in each area are visited once a month by registrars, most of whom are teachers in rural areas. Each month the evaluator is supposed to record the vital events which have occurred in his sample during the month. Every six months the areas are visited by supervisors from Ankara who visit the same households and obtain the same information. The two reports are then compared. The survey is now considered to be fairly accurate. Over the next few years it will provide a very useful measure of population dynamics in Turkey.

State Institute of Statistics. The State Institute of Statistics conducts a census at five year intervals; the last was in 1965 and the next will be in 1970.

State Planning Organization. The State Planning Organization, a branch of the Prime Minister's Office, was established by the military government after the 1960 revolution. The organization has included population planning in its last two five-year plans and each year it publishes a forecast of population trends for the coming year.

Medical schools. Medical schools are beginning to offer training in contraceptive technology. Both the Ankara and Istanbul Medical Schools have agreed to provide three credit hours per year of instruction in methods of family planning, to be taken during the last three years of medical training. In addition, a system of required rotating internships has been instituted; during the obstetrics and gynecology internship the trainee learns how to insert loops and how to make the proper enquiries and examinations prior to prescribing other methods.

Ministry of Education. The Education Ministry has accepted a chapter on family planning which may be included in a new biology text book for secondary schools.

Foreign Assistance

In 1968 Turkey received $500,000 in foreign aid for family planning primarily from the Swedish International Development Authority, United States Agency for International Development, and the Population Council. Apart from this financial assistance, Turkey is also receiving aid from the World Health Organization, which has recently become involved; in 1969 WHO sponsored a four-day teaching seminar for which three teachers were brought in from abroad.

Major Publications

The following is a selection of recent publications:

Alpay, A. "Life Tables from the Turkish Demographic Survey." *Turkish Demographic Survey*. Analytic Studies, Series A (1).

Berelson, B. "Turkey: National Survey on Population." *Studies in Family Planning*, (5):1–5. December 1964.

Cillov, H. "Population Increase of Turkey and Economic Development." *Bulletin of the Turkish Statistical Association*, 1(3). 1969.

Demeny, P., and F. Shorter. *Estimating Turkish Mortality, Fertility, and Age Structure*. University of Istanbul Publications No. 218. 1968.

Economic and Social Studies Conference Board. *Education as a Factor of Accelerated Economic Development*. 1967.

Fincancioğlu, N., N. Toraman, K. Somer. *The Güdül Knowledge, Attitude and Practice Survey*. Ministry of Health, Population Planning Directorate General. September 1968.

Fişek, N., and F Shorter. "Fertility Control in Turkey." *Demography*, 5(2). 1968.

Metiner, T. "Turkey: Answering the Demands of the People." *Family Planning Programs*. Edited by B. Berelson, Basic Books, Inc. 1969.

Ministry of Health, *Nufus Planlamasi*. Brochure No. 10 for use in Military and other adult training courses (Turkish only).

Ministry of Health, Population Planning Directorate General. *Demographic Characteristics of IUD Acceptors*. Demographic Series (1), August–December 1967, and (2) January–June 1968.

Shorter, F. "Fertility, Mortality and Population Growth in Turkey." *Population Index*, 34(1). January–March 1968.

Shorter, F., and B. Guvenç (eds.). *Turkish Demography*. Hacettepe University Publications No. 7. 1969.

State Institute of Statistics. *Census of Population*. 1960 and 1965.

State Planning Organization, Government of Turkey. *Second Five-Year Development Plan 1968–1972*. 1968.

Tokgöz, T. *Population Planning Activities*. Ministry of Health Series (372). 1967.

Tuncer, B. *The Impact of Population Growth on the Turkish Economy*. Hacettepe Institute of Population Studies, Publication No. 3. 1968.

Turkish Demographic Survey. *Vital Statistics 1965–66*. Ministry of Health. 1967.

Summary

Two factors are encouraging for the future of family planning in Turkey. First, in most areas of Turkey the women want family planning and the husbands do not object to it. Moreover, there is evidence that this overall demand is growing as awareness of new and available methods spreads. Second, it is becoming more apparent that the great economic development in Turkey is coming under increasing demographic pressures. The increasing number of large completed families in eastern Turkey appears to be raising the level of unemployment; and significant numbers of persons with little formal education are moving westward to settle on the fringes of the larger cities, thereby creating serious problems for the metropolitan communities. If these problems are carefully documented and if the government recognizes the seriousness of this situation, it may give the family planning program the high priority which is needed. When this occurs the groundwork which the Ministry has laid over the last several years will prove to have been invaluable.

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Other *Country Profiles* published to date are:

Hong Kong (November 1969)
Iran (December 1969)
Sierra Leone (September 1969)
Thailand (May 1969)
United Arab Republic (August 1969)